

willie?

Sund-Thur

2nd job 4pm

1st

ASAP

out
flexible

CMG APPLICATION FOR EMPLOYMENT

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS AND A BACKGROUND CHECK WILL BE COMPLETED

PLEASE COMPLETE PAGES 1-5

DATE 12-09-14

Name Hodge Angelina Danielle
Last First Middle Maiden

Present address 1516 4th St. N.
Number Street
St. Cloud MN 56303
City State Zip

Social Security No. 468 - 17 - 7671

Telephone (320) 296 8033

E-Mail ahodge160@gmail.com

If under 18, please list age _____

Referred by Walk-In

Position applied for (1) Any Open
and salary desired (2) \$09.00
(Be specific)

Shift available to work

1st ☒
2nd _____
3rd _____

How many hours can you work weekly? 40-45 Can you work nights? No

Employment desired ☒ FULL-TIME ONLY ☐ PART-TIME ONLY ☐ FULL- OR PART-TIME

When available for work? ASAP

Do you have responsibilities or commitments that will prevent you from meeting specified work schedules?

☒ No ☐ Yes If so, please explain _____

Do you anticipate any absences from work on a regular basis?

☒ No ☐ Yes If so, please explain _____

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School	home school		13	GED
College	Central Lakes college	Staples, MN	3	general & robotics
Bus. or Trade School				
Professional School				

APPLICATION FOR EMPLOYMENT

DO YOU HAVE A DRIVER'S LICENSE? ___ Yes ☒ No

What is your means of transportation to work? My own vehicle, boyfriend drives me

Driver's license number 6457064412416 State of issue MN

Operator ___ Commercial (CDL) ___ Chauffeur ___

Expiration date _____

Have you had any accidents during the past three years? ___ Yes ___ No

If so, how many? _____

Have you had any moving violations during the past three years? ___ Yes ___ No

If so, how many? _____

Please list two references other than relatives or previous employers.

Name Debbie Bueckers Name Ciara Ross

Position packager Position Factory

Company FDC Company Mastersons

Address St. Cloud, MN Address St. Cloud, MN

Telephone (320) 292 0423 Telephone (320) 224 - 9173

APPLICATION FOR EMPLOYMENT

MILITARY

HAVE YOU EVER BEEN IN THE ARMED FORCES? __ Yes ☒ No

ARE YOU NOW A MEMBER OF THE RESERVE OR NATIONAL GUARD? __ Yes ☒ No

Branch _____ Specialty _____

Date Entered _____ Discharge Date _____

WORK EXPERIENCE

Please list your work experience for the **past five years** beginning with your most recent job held.
If you were self-employed, give firm name. **Attach additional sheets if necessary.**

Name <u>Best Buy Auto</u>	Supervisor name <u>Chuck Mock</u>	
Position <u>Detailer / sales</u>	Employment dates	Pay or salary <u>7.75</u>
Company <u>Best Buy Auto</u>	From <u>03/2010</u>	Start <u>06/2012</u>
Address <u>11245 15th Ave</u>	To _____	Final _____
<u>Little Falls, MN</u>	Your last job title <u>detailer / sales</u>	
Telephone <u>(320) 632 5050</u>		
Reason for leaving (be specific) <u>Loss in hours, couldn't afford travel</u>		
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company. <u>Cleaning vehicles, sales, parts ordering</u>		

Name <u>Super One</u>	Supervisor name _____	
Position <u>Cashier</u>	Employment dates	Pay or salary <u>8.25</u>
Company <u>Super One</u>	From <u>02/2009</u>	Start <u>03/2010</u>
Address <u>Wadena, MN</u>	To _____	Final _____
Telephone (____)	Your last job title <u>Cashier</u>	
Reason for leaving (be specific) <u>Relocated</u>		
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Company. <u>Cashier, serve customers</u>		

APPLICATION FOR EMPLOYMENT

WORK EXPERIENCE

Please list your work experience for the **past five years** beginning with your most recent job held. If you were self-employed, give firm name. **Attach additional sheets if necessary.**

Name <u>Talahi Care Center</u>	Supervisor name _____	
Position <u>CNA</u>	Employment dates	Pay or salary <u>10.80</u>
Company <u>Talahi Care Center</u>	From <u>03/2008</u>	Start <u>02/2009</u>
Address <u>St. Cloud, MN</u>	To _____	Final _____
Telephone (____) _____	Your last job title <u>CNA</u>	
Reason for leaving (be specific) <u>Bedrest pregnancy</u>		
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company. <u>Care of residents</u>		

Name <u>Masterson</u>	Supervisor name _____	
Position <u>Temp</u>	Employment dates	Pay or salary <u>8.00</u>
Company <u>Masterson</u>	From <u>12/2014</u>	Start <u>Current</u>
Address <u>St. Cloud, MN</u>	To _____	Final _____
Telephone (____) _____	Your last job title <u>Temp</u>	
Reason for leaving (be specific) _____		
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company. <u>National Vision - picker</u>		

May we contact your present employer? ☒ Yes ___ No

Did you complete this application yourself ☒ Yes ___ No

If not, who did? _____

**PLEASE READ CAREFULLY
APPLICATION FORM WAIVER**

In exchange for the consideration of my job application by Corporate Management Group, Inc.,

I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements and the like as they may exist from time to time, or other company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Corporate Management Group, Inc. (CMG), or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by an officer of CMG. Both the undersigned and CMG may end the employment relationship at any time, without specified notice or reason. If employed, I understand that CMG may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts will result in my disqualification from consideration for employment or, if discovered after I begin employment, will result in my termination. I hereby give CMG permission to contact schools, all previous employers (unless otherwise indicated), references and others and hereby release CMG from any liability as a result of such contact.

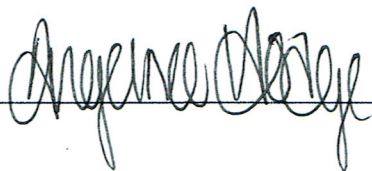
I understand that a comprehensive background check may be conducted to determine my eligibility for hire by CMG. This may include but is not limited to, investigations of criminal and/or conviction records, driving records and/or a drug screen test as required by clients, government regulations or by CMG policies.

I release CMG and other persons or entities from any claims that might be based on CMG's decision to conduct a background check.

I understand that, in connection with the routine processing of your employment application, CMG may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics and mode of living. Upon written request from me, CMG will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with CMG shall be probationary for a period of ninety (90) days and further that at any time during the probationary period or thereafter, my employment relationship with CMG is terminable at will for any reason by either party.

Signature of applicant



Date:

12-09-14